



HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaliethics.org

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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type of Print Clearly)					
PARTI LOBBYIST					
NAME(Last)	(First)	(Middle)	TELEPHONE		
BEST, Kathryn			808 548-4811		
MAILING ADDRESS (Street)			FAX		
P.O. Box 898900			808 548-2975		
·					
(City)	(State)	(Zip	Code)		
Mililani, Hawaii	96789	÷			
EMPLOYING ORGANIZATION	(Fill in only if you are employed by a business en	itity which has been retained to lobby)	TELEPHONE		
n/a					
MAILING ADDRESS (Street)			FAX		
•					
·					
(City)	(State)	(Zip	Code)		

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU L	OBBY FOR (Do not abbreviate)	TELEPHONE
CASTLE & COOKE HOMES H	AWAII, INC.	808 548-4811
MAILING ADDRESS (Street)		FAX
P.O. Box 898900		808 548-2975
(City)	(State)	(Zip Code)
Mililani, HI 96789		
NAME OF PERSON RESPONSIBLE FO	OR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Harry A. Saunders		808 548-4811
MAILING ADDRESS (Street)		FAX
P.O. Box 898900		808 548 - 2975
(City)	(State)	(Zip Code)
Mililani, HI 96789		
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Agriculture	SUBJECTS UPON WHICH Y	Human Services	Science, Technology & Economic Developmen	
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)	
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections		
Xall	Best Signafyre of Lobbylst)	o the best of my knowledge, con	1/06	
PART V AUTHORIZATION				
NAME	Т	ITLE OF AUTHORIZING OFFICER OF	R PERSON REPRESENTED	
Harry A. Saunders	ry A. Saunders Pre			
NAME OF ORGANIZATION (If applica	able)	TELEP	TELEPHONE	
CASTLE & COOKE HOMES HA	WAII, INC.	808	808 548-4811	
MAILING ADDRESS (Street)	FAX			
P.O. Box 898900	808	548-2975		

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Zip Code)

JAN 13 2006

(Date)

(State)

(Signature of Authorizing Officer or Person Represented)

(City)

Mililani, HI 96789